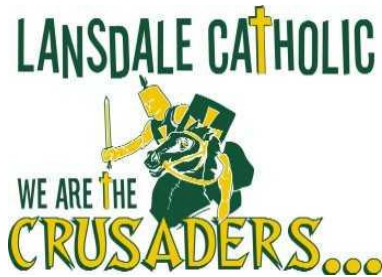


700 Lansdale Avenue- Lansdale, PA 19446- (215)-362-6160

www.lansdalecatholic.com



Lansdale Catholic High School

TEACHER EVALUATION

I. Student's Name: _____
Last First

II. Teacher's Name (Please print or type): _____

Position: _____

III. Background Information:
How long have you known this student and in what context? _____

What are the first words that come to your mind to describe this student?

List the courses you have taught this student noting for each the student's year in school (9th, 10th, 11th, or 12th) and the level of course difficulty (AP, Honors, elective, etc.). If you have not taught the student, but have worked with the student in another context, please identify the activity, sport, etc.

IV. Evaluation
Please feel free to write whatever you think is important about this student, including a description of academic and personal characteristics.

V. Ratings:

Compared to other students in the entire secondary school class, how do you rate this student in terms of:

No basis		Average	Below Average	Good (above Average)	Very Good (well above Average)	Excellent (top 10%)	One of the top few encountered in my career
	Creative original thought						
	Motivation						
	Self-Confidence						
	Independence; initiative						
	Intellectual ability						
	Academic Achievement						
	Written expression of ideas						
	Effective class discussion						
	Disciplined work habits						
	Potential for growth						

Teacher Signature _____ **Date** _____